2012 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# P98000107681

Entity Name: AUTO CARE COLLISION CENTER BY BETO'S, INC.

Current Principal Place of Business:

16206 N. NEBRASKA AVE.
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

16206 N. NEBRASKA AVE.
LUTZ, FL 33549

New Mailing Address:

FEI Number: 59-3549559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PINTO, LUIS
16206 N. NEBRASKA AVE.
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

PINTO, LUIS A
16206 N. NEBRASKA AVE.
LUTZ, FL 33549 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LUIS A. PINTO 04/30/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: MGR
Name: PINTO, LUIS A
Address: 16206 N. NEBRASKA AVE.
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS A. PINTO MGR 04/30/2012
Electronic Signature of Signing Officer or Director Date